| BEST AVAILA | LE COPY | | | | | : | |
|--|-------------------|-----------------------------------|-----------|------------------------|----------|---------------------|------------------------|
| PATENT APPLICATIO | | INATION RECO | RD | Application 99 | | ocket Num | ber |
| CLAIMS AS FILED - PART I SMALL ENTITY (Column 1) (Column 2) TYPE | | | | | | OTHER SMALL | |
| TOTAL CLAIMS | | | RA | TE FEE | 1 | RATE | FEE |
| OR | NUMBER FILED | NUMBER EXTRA | BASI | FEE 370.00 | OR | BASIC FEE | 740.00 |
| OTAL CHARGEABLE CLAIMS | 34 minus 20= | minus 20= • /4 | | 9= 126 | OR | X\$18= | 252 |
| NDEPENDENT CLAIMS | 2 minus 3 = | • / | X4 | 1.14 | OR | X84= | 84 |
| ULTIPLE DEPENDENT CLAIM PRESENT | | - | | 1 | +280≃ | 01 | |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | | +14 TO | | OR OR | TOTAL | 1076 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | TAL 538_ ALL ENTITY | OR | OTHER SMALL | THAN |
| CLAIMS REMAINING AFTER AMENOMENT Total tndependent | NUM PREVI | HEST HESEN HESENT OUSLY EXTRA FOR | RA | TE TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| Total • 3 | Minus (| 26 = | X\$ | 9= | OR | X\$18= | |
| Independent • | Minus *** | 0 - | X4 | 2= | OR | X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT COMM | | | +14 | 10= | OR | +280= | |
| 3-4-05 | | | ADDIT | OTAL | OR | YOTAL ADDIT, FEE | |
| (Column 1) | (Colu | ımn 2) (Column 3) | _ | | • | | |
| CLAIMS REMAINING AFTER AMENDMENT Total | NUI PREV | HEST ABER PRESENT HOUSLY FOR | R/A | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Minus (| 02. | XS | 9= | OR | X\$18= | |
| Independent • Independent | Minus ••• | 10 1/ | X4 | 125 | OR | X84= | |
| FIRST PRESENTATION OF M | IULTIPLE DEPENDEN | NECAIM / | רן ו | 40= | 1 | 7 | |
| \bigcirc 0 | | a ³ | Ų, | TOTAL | OR | TOTAL | |
| SH 25 Micaluma 11 | (Coli | ımn 2) (Column 3) | ADDI | r. FEE | JOR | ADDIT. FEE | <u></u> |

CLAIMS REMAINING HIGHEST AMENDMENT C NUMBER PRESENT PREVIOUSLY EXTRA AFTER PAID FOR MENDMENT Total Minus Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

ADDI-ADDI-TIONAL TIONAL RATE RATE FEE FEE X\$18-X\$ 93 OR X84= X42= OR +280= +140= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

**The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. TOTAL ADDIT. FEE